PEST AVAILABLE COPY

,								(pplication or Docket Number					
	PATENT A	APPLICATIO Effecti	RD		15	5-1							
		SMALL ENTITY mn 2) TYPE			NTITY	OR	OTHER SMALL I						
TOTAL CLAIMS			22				R/	ATE.	FEE] [RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		BASI	C FEE	355.00	OR	BASIC FEE	· 710.00	
TOTAL CHARGEABLE CLAIMS			22 minus 20=		· 2		X	X\$ 9=		OR	X\$18=	34	
INDEPENDENT CLAIMS			ろ minus 3 =		*		X40=			OR	X80=		
MU	LTIPLE DEPEN	DENT CLAIM PE	RESENT				+135=			OR	+270=		
* If the difference in column 1 is less than zero, enter "0" in column 2							TOTAL			OR OR	TOTAL	746	
CLAIMS AS AMENDED - PART II										•	OTHER	THAN	
_	<u></u>	(Column 1)	(Colum			(Column 3) S		ALL	ENTITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	RA	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		=	X	§ 9=		OR	X\$18=		
AME	Independent	*	Minus	***		=	X40=			OR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+1	35=		OR	+270=		
TOTAL										OR	TOTAL ADDIT. FEE		
					mn 2)	(Column 3)	וטטא	F CC			AUUII.TEE	<u> </u>	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA	R/	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		=	X	9=		OR	X\$18=		
	Independent	*	Minus	***		=	X.	40=		OR	X80=		
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						 			1	070		
								35= TOTAL		OR	+270= TOTAL		
	ADDIT.									OR	ADDIT. FEE		
	(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST											· · · · · · · · · · · · · · · · · · ·	
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREVI	MBER OUSLY FOR	PRESENT EXTRA	R/	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X	9=		OR	X\$18=		
	Independent	•	Minus	***]=	X.	40=	 	OR	X80=		
Ľ	FIRST PRESE	NTATION OF M	ULTIPLE DEPENDEN		T CLAIM		▎├─			1		 	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.											+270= TOTAL	 	
**	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
	The "Highest Nur	nber Previously Pa	id For" (Total o	or Independ	dent) is th	e highest numbe	er found in	the ar	opropriate bo	x in cc	olumn 1.		